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STATEMENT OF

FEC FORM 1		ORGANIZATION			Office Use Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
KINETIC C	ONCE	PTS INC POL	ITICAL ACTION	COMMIT	TEE (KCIPAC)
ADDRESS (number and street)		PO BOX 659508			
(Check if address is changed)		SAN ANTONIO		TX , 7	8265-9508
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only one lulu.olson@kci1.com	e-mail address)		
COMMITTEE'S WEB	PAGE ADD	RESS (URL)			
(Check if is change	address				
2. DATE 02 08 2012					
3. FEC IDENTIFICATION NUMBER C C00235176					
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)		
I certify that I have of	examined this	Statement and to the be	st of my knowledge and belief it	is true, correct a	nd complete.
Type or Print Name	of Treasurer	Ms. Lulu P. Olson			
Signature of Treasurer Ms. Lulu P. Olson [Electronically Filed] Date Date Date					
NOTE: Submission of		•	n may subject the person signing the TION SHOULD BE REPORTED W		e penalties of 2 U.S.C. §437g.
Office Use			For further information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)